Express Mail No.:

EV 373445216 US

Date Deposited:

10/21/2004

PTC/SB/06 (08-00)
Approved for use through 10/31/2002. OMB 0651-0032
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

'							_						
PATENT APPLICATION FEE DETERMINATION RECOR									Application or Docket Number				
									<del>-2070.00</del> 4	101	0048	03	
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY			OR	OTHER THAN SMALL ENTITY			
FOR		NUME	NUMBER FILED			NUMBER EXTRA		RAT	E FEE	1	RATE 5	FEE 740,00	
BASIC F									4.7	OR	<u> </u>		
TOTAL C (37 CFR ).		6	minus 20 =		• 0			x \$ 9	= 0	OR		0	
INDEPEN (37 CFR ).	VDENT CL.( 16(b))	AIMS .	minus 3 =		• 0			4.	= 0	OR		0	
		DENT CLAIM PR	LAIM PRESENT 07 CFR 1.160			(d)) O		+ 150	_ 0	OR	300 _	0	
* If the difference in column 1 is less then zero, enter *0" in column 2								TOTA	L	OR	TOTAL	87400	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMAL	LENTITY	OR	OTHER 1	THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	-	HIC NU PREV	CHEST JMBER JOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO TOTAL	otal CFR 1.16(c))	* Q	Minus	** 2		= 0/		x \$ <u>9</u>	_ 0 /	OR	x \$_18 =	0	
Inde	pendent FR 1.16(b))	* 1	Minus	*** 3		= 0	11	AA	_ 0 /	OR	x 88 =	0	
	IRST PRES	ENTATION OF M	ULTIPLE DE	PENDEN	T CLAIM ()	7 CFR (.16(d))	11	+ 150	= 0	OR OR	+ 300 =	1	
(Column 1) (Column 2) (Column 3)								TOTAL		OR	TOTAL DDIT. FEE	0	
AMENDMENT B	-	CLAIMS REMAINING AFTER AMENDMENT	,	NU PREV	GHEST IMBER IOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Q ord	Total FR 1.16(c))	•	Minus	**		=		ر <mark>9</mark> ۽	= 0	ÓR	x \$ <u>.18</u> =	0 .	
Inde	pendent CFR 1.16(b))	*	Minus	***		=		x_44	_ 0	OR OR	x 88 =	0	
~ 1	FIRST PRESENTATION OF MULTI			IPLE DEPENDENT CLAIM		37 CFR 1.16(d))		150	= 0	OR	+ 300 =	0	
	<del>,</del>	(Column 1)		(Col	umo 2)	(Column 3)	ΑI	TOTA DDIT. FE	- 1 0	OR <sub>A</sub>	TOTAL DDIT, FEE	0	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU PREV	SHEST MBER TOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO OT	otal FR 1.16(c))	•	Minus	**		=	1	x <b>s</b> _9	= 0	OR	x \$_18	0	
Inde	pendent FR 1.16(b))	•	Minus	***		=	۱,	44	= 0	OR OR	x_88_=	0	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							150	= 0	OR OR	+ 300 =	0	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3. • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". •• If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

SEND TO: Mail Stop Commissioner for Patents P. O. Box 1450, Alexandria, VA 22313-1450